

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	FR	1016	6/11/61
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	0
3	✓	✓	/
4	✓	✓	/
5	✓	✓	/
6	✓	0	0
7	0	0	0
8	0	0	0
9	✓	✓	0
10	✓	✓	0
11	✓	✓	0
12	✓	✓	0
13	✓	✓	0
14	✓	✓	0
15	✓	✓	0
16	✓	✓	0
17	✓	✓	0
18	✓	✓	0
19	✓	✓	0
20	✓	✓	0
21	✓	0	0
22	0	0	=
23	0	0	=
24	✓	✓	=
25	✓	✓	=
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27	✓	✓	=
28	✓	✓	=
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If more than 150 claims or 10 actions  
staple additional sheet here

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Pb 04/11